1. WORK ORDER NUMBER **VISUAL INFORMATION (DA) WORK ORDER** 2. SECURITY CLASSIFICATION For use of this form, see AR 25-1; the proponent agency is ODISC4 UNCLASSIFIED **SECTION I - REQUIREMENT** 3a. TO (VI Activity) 4a. FROM (Unit or Activity) TRAINING SUPPORT CENTER 3b. E-MAIL ADDRESS 4b. E-MAIL ADDRESS 5. ACCOUNT CODE 6. ACCOUNT NO. 7a. REQUESTER (Name, Grade) **b. PHONE AND FAX NUMBERS** 8. DATE REQUESTED (YYYYMMDD) 9a. ALTERNATE POINT OF CONTACT b. PHONE AND FAX NUMBERS 10. DATE REQUIRED (YYYYMMDD) 11. QUANTITY 12. DESCRIPTION OF WORK (Be specific and attach any diagrams, a. Presentation Support b. Digital Image Files c. Digital Image Files (Duplicate) d. Hard Copies e. Charts/Posters f. Signs q. Photos h. Video Documentation i. Video Production j. Video Duplication k. CD Duplication I. Multimedia m. TADSS n. TADSS Maintenance o. Other (Specify) 13. JUSTIFICATION FOR REQUESTED SERVICE: **14B. VALIDATION SIGNATURE** 14a. Requested service is for official purposes and is required by stated deadline. SECTION II - JOB ASSIGNMENT (FOR AUDIOVISUAL OFFICE USE ONLY) 15. DATE RECEIVED (YYYYMMDD) 16. DATE ASSIGNED (YYYYMMDD) 17. AUDIOVISUAL FACILITY APPROVAL (Signature) 18. SPECIAL INSTRUCTIONS **SECTION III - WORK RECEIPT** 19A. CUSTOMER NOTIFIED 19b. RECEIVED BY (Signature) 19c. DATE (YYYYMMDD) CALLED:

EMAILED: NPU-MTU: